PART B - FEE(S) TRANSMITTAL

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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	ITOR		ATTO	RNEY DO	OCKET NO.	CONF	FIRMATION NO.	
09/852,910	05/11/2001		Annette Gilchris	t			2661-1	01		4758	
TITLE OF INVENTION	N: METHOD FOR IDEN	TIFYING INHIBITORS	OF G PROTEIN COU	JPLED I	RECEPTOR	R SIGNALI	NG				
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE PI	REV. PA	tgje 504 Fil: Aggi	TOTAL	300e08 daar 15.00 da	<u> </u>	DATE DUE	
nonprovisional	NO	\$1400	\$300		\$0			\$1700		03/12/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS	S							
WESSENDORF, TERESA D		1639	435-007100								
1. Change of correspond CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent atternates. Rothwell, Figg, Ernst & Manbeck pc										
Change of corresp Address form PTO/S	or agents OR, alternatively,										
Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print of	or type)							
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Comp	ified below, no assignee oletion of this form is NO	data will appear on t T a substitute for filing	he pater	nt. If an as:	signee is ic	dentified	below, the	locument	has been filed for	
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Caden Biose	' Ma	adisor	ı, WI								
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	🔲 ln	dividual 🗵	Corporati	on or oth	er private gr	oup entit	y Government	
4a. The following fee(s)	are submitted:	41	b. Payment of Fee(s):	(Please	first reappl	ly any prev	iously pa	aid issue fee	shown a	ibove)	
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			overpayment, to I	Deposit	Account Nu	mber <u>02-2</u>	135	(enclose a	ın extra c	copy of this form).	
	itus (from status indicated in SMALL ENTITY statu		b. Applicant is no	o longer	claiming SI	MALL EN	TITY stat	us. See 37 C	FR 1.27((g)(2).	
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submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	d application form to the ions for reducing this but /irginia 22313-1450. DC 313-1450.	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the D NOT SEND FEES OR opersons are required to re-	e Chief Information C COMPLETED FORM	individu Officer, I IS TO T	ial case. An U.S. Patent HIS ADDR	y comment and Traden ESS. SENI	is on the nark Offic D TO: Co	amount of the ce, U.S. Deporture of the commissioner	me you repartment of for Pater	of Commerce, P.O. nts, P.O. Box 1450,	